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Bib Data Sheet

CONFIRMATION NO. 5791

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|--|---|---------------------------|---|----------------------------------|
| SERIAL NUMBER 09/847,990 | FILING DATE 05/03/2001 RULE | CLASS 705 | GROUP ART UNIT 2165 | ATTORNEY DOCKET NO. 7540*2 |
| APPLICANTS Joe D'Silva, North Wales, PA; | | | | |
| ** CONTINUING DATA ***** <i>MR</i> THIS APPLN CLAIMS BENEFIT OF 60/201,630 05/03/2000 | | | | |
| ** FOREIGN APPLICATIONS ***** <i>MR</i> | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/27/2001 | | ** SMALL ENTITY ** | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>MR</i> Examiner's Signature <i>MR</i> | | STATE OR COUNTRY PA | SHEETS DRAWING | TOTAL CLAIMS 9 |
| INDEPENDENT CLAIMS 1 | | | | |
| ADDRESS Connolly Bove Lodge & Hutz LLP 1220 Market Street <i># 23116</i> P.O. Box 2207 Wilmington, DE 19899 | | | | |
| TITLE Method and system for using a communications network in the selection and delivery of pharmaceutical formulation information, training and products | | | | |
| FILING FEE RECEIVED 355 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |